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CONFIRMATION NO. 2737

<b>SERIAL NUMBER</b> 10/540,369	<b>FILING OR 371(c) DATE</b> 06/23/2005 <b>RULE</b>	<b>CLASS</b> 530	<b>GROUP ART UNIT</b> 1646	<b>ATTORNEY DOCKET NO.</b> 3150 USOP
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**APPLICANTS**

Zen-ichi Terashita, Osaka, JAPAN;  
 Keiji Kusumoto, Osaka, JAPAN;  
 Fuminari Yamaguchi, Osaka, JAPAN;  
 Yoshimi Imura, Osaka, JAPAN;

**\*\* CONTINUING DATA \*\*\*\*\***

This application is a 371 of PCT/JP03/16656 12/25/2003

**\*\* FOREIGN APPLICATIONS \*\*\*\*\***

JAPAN 2002-380386 12/27/2002

Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no	<b>STATE OR COUNTRY</b> JAPAN	<b>SHEETS DRAWING</b>	<b>TOTAL CLAIMS</b> 15	<b>INDEPENDENT CLAIMS</b> 3
35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Allowance				
Verified and Acknowledged	Examiner's Signature	Initials		

**ADDRESS**

23115

**TITLE**

Body weight gain inhibitor

<b>FILING FEE RECEIVED</b> 900	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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